

99 JAN -6 PM 3:58

H.D.

## LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration ☐

1. Effective Date of Registration 1/3/99

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

### REGISTRANT

3. Registrant name THE EAGLES GROUP, INC.

Address 499 SOUTH CAPITOL ST. SW. SUITE 520

City WASHINGTON State DC Zip 20003

4. Principal place of business (if different from line 3)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name

(202) 484-0082 Contact \_\_\_\_\_ E-mail (optional) \_\_\_\_\_

6. General description of registrant's business or activities

BUSINESS DEVELOPMENT, GOVERNMENT AFFAIRS

CLIENT A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10. ☐ Self

7. Client name CAPITOL DEVELOPMENT ASSOCIATES

Address 63 EAST MAIN ST.

City MOORESTOWN State NJ Zip 08057

8. Principal place of business (if different from line 7)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

REVENUE RECOVERY AND HEALTH CARE SERVICES

### LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>TERENCE J. COSTELLO</u>	

Registrant Name \_\_\_\_\_

Client Name \_\_\_\_\_

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

HCR TAX VET12. Specific lobbying issues (current and anticipated) PROVISIONS CONCERNING:HEALTH CARE SAVINGS PROGRAMS AND COMPLETING  
CONTRACTS WITHIN THE AUTHORIZATION AND APPROPRIATION BILLS  
FOR FISCAL 2000 BUDGET SUBMISSIONS FROM THE D.C. GOVERNMENT,  
HEW & VETERANS AFFAIRS AGENCIES.**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

☒ No → Go to line 14.☐ Yes → Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

**FOREIGN ENTITIES**

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**  
 b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; **OR**  
 c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

☒ No → Sign and date the registration.☐ Yes → Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client

Signature *Terence J. Costello* Date 1/6/99  
 Printed Name and Title TERENCE J. Costello, President

SECRETARY OF THE SENATE  
99 JAN -6 PM 3:58  
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4. Principal place of business (if different from line 3)

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State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name

(202) 484-0082

Contact \_\_\_\_\_

E-mail (optional) \_\_\_\_\_

6. General description of registrant's business or activities

BUSINESS DEVELOPMENT, GOVERNMENT AFFAIRS

**CLIENT** A lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10. ☐ Self

7. Client name FIRST ENVIRONMENTAL INC.

Address 90 RIVERDALE RD.

City RIVERDALE

State NJ Zip 07457

8. Principal place of business (if different from line 7)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

### LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>TERENCE J. COSTELLO</u>	<u>1</u>

Registrant Name \_\_\_\_\_ Client Name \_\_\_\_\_

### LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

DEF

12. Specific lobbying issues (current and anticipated)

2000  
SEEKING FUNDS IN THE FISCAL DEFENSE AUTHORIZATION  
AND APPROPRIATION BILLS CONCERNING ENVIRONMENTAL  
MANAGEMENT SYSTEMS

### AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

☒ No → Go to line 14.

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Name	Address	Principal Place of Business (city and state or country)

### FOREIGN ENTITIES

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Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client

Signature

Date

Printed Name and Title

Form LD-1 (Rev. 06/98)

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